

## Public Health Regional Offices MCH Services – Title V

### Program Operating Plan

<b>Program or Division Name</b>	Public Health Regional Offices MCH Services – Title V
<b>Bureau</b>	Title V Block Grant Administration
<b>Associateship</b>	Family Health
<b>Program Purpose</b>	<p>Public Health Regional Offices Maternal and Child Health Services receive Title V funding to provide population-based and infrastructure-building services. In areas with no providers or a shortage of providers, PHRs <b>provide or subcontract direct health care</b> and/or enabling services. Direct health care services include prenatal care, family planning, and child health services. <b>Enabling services</b> include care management, outreach, home visits, health education, and coordination with Medicaid. All PHRs provide quality assurance for MCH contractors and support for statewide vision and hearing screening services. All PHRs provide other regionally determined, population-based and infrastructure-building services (see list below). In addition, some PHRs provide non-MCH services such as tuberculosis, communicable disease, epidemiology, sexually transmitted diseases, Hansen's disease, and HIV counseling.</p>
<b>Major Responsibilities</b>	<ul style="list-style-type: none"><li>• Provide quality <b>assurance and technical assistance</b> to Title V providers.</li><li>• Conduct <b>population-based activities</b> on the local community level, such as spinal screening certification, and vision and hearing data monitoring.</li><li>• Provide MCH <b>direct services</b>, such as family planning, prenatal care, and child health.</li><li>• Provide <b>enabling services</b> to eligible clients, such as case management, health education, coordination with Medicaid outreach, and medical transportation.</li></ul>
<b>Population Served</b>	<p>Women and children residents of Texas who are not eligible for Medicaid or CHIP who meet the following criteria: a child age 0 through 21, a female age 12 to 45, or a male age 21 or over seeking a vasectomy, with a family income less than 185% of FPIL. Pregnant women and other potentially fertile women age 45 and over, who would meet Title V eligibility criteria shall also be regarded as potentially Title V eligible.</p>
<b>Contact Information</b>	<p>Fouad Berrahou, Ph.D., Title V Director Phone: 512.458.7111, x 3207/ FAX: 512.458.7443 <a href="mailto:Fouad.berrahou@tdh.state.tx.us">Fouad.berrahou@tdh.state.tx.us</a> Program Website: <a href="http://www.tdh.state.tx.us/mch">http://www.tdh.state.tx.us/mch</a> Location: Moreton Building, Room M-328 Mailing Address: 1100 W. 49<sup>th</sup> Street, Austin, TX 78756</p>

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### Program Objectives

#### Services Provided/ Activities

#### Health Care Safety Net Services

**Note:** Some services are provided in all clinics, some are provided in limited number of clinics.

Direct health care:

PHR 1:

non-MCH services: tuberculosis, immunizations, communicable disease, epidemiology, sexually transmitted disease, HIV counseling

PHR 2/3:

non-MCH services: tuberculosis, immunizations, communicable disease, epidemiology

PHR 4/5:

MCH services: family planning, prenatal, child health

PHR 6/5:

MCH services: family planning, prenatal, child health, tuberculosis, immunizations

PHR 7:

MCH services: family planning, prenatal, child health

PHR 8:

MCH services: contracted through area Title V Program providers

non-MCH services: tuberculosis, immunizations, sexually transmitted diseases, Hansen's disease, communicable disease

PR 9/10:

MCH services: family planning, prenatal, child health;

non-MCH services: tuberculosis, immunizations, sexually transmitted diseases, HIV, Primary Health Care Program eligibility and referral, Breast and Cervical Cancer Control Program (BCCCP) screening,

PHR 11:

MCH services: family planning, prenatal, child health; dysplasia (contracted)

non-MCH services: tuberculosis, immunizations, epidemiology, HIV counseling, Hansen's, STDs.

Enabling:

PHR 1:

MCH services: case management, health education, coordination with Medicaid outreach, medical transportation

PHR 2/3:

MCH services: case management, health education, home visits,

non-MCH services: special immunization clinics

PHR 4/5:

MCH services: case management

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### PHR 6/5, PHR 7, PHR 8:

MCH services: case management, health education, coordination with Medicaid, outreach

### PR 9/10:

MCH services: case management, coordination with Medicaid, health education, outreach,

non-MCH services: WIC, transportation (M-Tract)

### PHR 11:

MCH services: case management, outreach, home visits, and health education

## Essential Public Health Services (EPHS)

Population Based:

### All PHRs:

Provide vision and hearing related services (data monitoring, training workshops, quality assurance monitoring of trainers, technical assistance, audiometer calibration, respond to technical assistance requests).

### PHR 1:

- 1) Conduct spinal screening certification.
- 2) Offer Denver II Developmental Screening training.
- 3) Develop and present health education programs related to health care risk prevention for children, adolescents, and women.
- 4) Review, revise, update sample educational materials and sample clinical protocols related to women's health.

### PHR 2/3:

- 1) Develop health education materials, promote via media and deliver education.

### PHR 4/5N:

- 1) Provide spinal screening training sessions three times/year.
- 2) Provide lead screening surveillance, follow-up, including environmental assessments for all children with elevated leads; follow-up children until lead levels to normal.

### PHR 6/5:

- 1) Establish and deliver MCH community education program in Liberty County.
- 2) Establish lead risk assessment and education in Liberty County Head Start Program.
- 3) Establish adolescent Hepatitis B initiative via PHR clinics, schools and other community sites, administer immunizations.
- 4) Participate on regional team for childhood lead surveillance, follow-up, distribution of lead education materials.

### PHR 7:

- 1) Develop and present health education programs related to health risks and prevention for infants, children, women, and adolescent health.

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- 2) Coordinate school spinal screening efforts, including certification of screeners and instructors, consultation, and updating training.
- 3) Coordinate with Texas Health Steps and Environmental Control to provide lead screening, follow-up, and removal.

### PHR 8:

- 1) Network with local community MCH campaigns, assess issues and participate in campaigns.
- 2) Develop and present health education programs related to health risk and prevention for infants, children, women and adolescent health.
- 3) Conduct Hepatitis B initiatives via PHR clinics, schools and community sites.
- 4) Provide education to Texas Health Steps providers on maternal and child health program standards.
- 5) Lead surveillance, follow-up, and coordinated environmental assessments with lead coordinator.
- 6) Coordinate spinal screening efforts and updating training of community providers.

### PHR 9/10: N/A

### PHR 11:

- 1) Obtain scoliosis screening training, recruit trainees from Education Service Center; conduct training to train trainers; maintain list of approved instructors; and evaluate training of approved instructors.
- 2) Obtain VHS instructor certification; work with VHS manager to determine report compliance; contact non-complying agencies; and conduct compliance audits.
- 3) Conduct health promotion activities to increase exercise among population at-risk for diabetes in Starr County.
- 4) Inventory health education materials and educators and disseminate this information.

### Infrastructure – building:

#### All PHRs:

Quality assurance for contractors (technical assistance visits, site visits, follow-up correspondence/reports, ongoing monitoring of MCH population-based contracts, provider relations).

### PHR 1:

- 1) Conduct training to contractors and Medicaid providers.
- 2) Review literature and write articles related to women's, adolescent and child health.
- 3) Develop and offer adolescent health care workshop.
- 4) Participate in local MCH coalitions.
- 5) Maintain information and referral resource guide.
- 6) Provide technical assistance to existing and new direct health care and population-based contractors for quality assurance and clinical services protocols, community assessments, coalition building, assess training needs, provide continuing education.

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### PHR 2/3:

- 1) Attend coalition meetings.
- 2) Maintain information and referral list of resources.

### PHR 4/5N:

Participate in community partnership coalitions.

### PHR 6/5:

- 1) Participate in and/or facilitate Local Health Department Task Force, coalitions, advisory health boards.
- 2) Provide information, educate leadership on MCH issues.
- 3) Develop and maintain web site resource book for information and referral.
- 4) Provide support for Medicaid Targeted Case Management program (review applications, provide training).
- 5) Review RFP's.
- 6) Provide technical assistance in development of grant proposals.
- 7) Work with school nurses to increase vaccines for children providers.

### PHR 7:

- 1) Participate in community needs assessment efforts.
- 2) Facilitate development of Parish Nurse Program in selected counties.
- 3) Conduct health status monitoring/surveillance of communicable diseases that affect women and children, including investigations and training.

### PHR 8:

- 1) Establish a child abuse; coalition and referral system to reduce the incidence of child abuse, train PHR nurses in identification of abuse; establish resource list; and initiate parenting education classes.
- 2) Network with regional school nurses to identify teens at-risk for unintended pregnancies, obtain data on births, provide outreach and link teens with case management.
- 3) Reduce vaccine reportable infectious diseases in children; implement recall program; implement hand-washing classes in community-based programs; administer vaccines; and conduct surveillance on reportable diseases.
- 4) Conduct assessments where needed.
- 5) Provide technical assistance to existing and new direct health care contractors on maternal and child health programs.
- 6) Establish a partnership with the HIV/STD program to increase the number of women and their contacts treated for associated risk and disease.
- 7) Participate on local school health committees to address maternal and child health issues.
- 8) Participate with local public health boards to access and review the MCH needs of the community.

### PHR 9/10:

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- 1) Conduct community assessment and develop five year plan for population-based services based on needs.
- 2) Leverage resources to address clinical and population-based needs through networking, coalition-building, use of media to promote use of services, and review of contractor data to ensure clients are referred to Medicaid.
- 3) Increase participation in community coalitions.
- 4) Participate in development of perinatal systems.
- 5) Provide technical assistance to existing and new direct health care and population-based contractors re: QA and clinical services protocols, community assessments, and coalition-building. Assess training needs and provide continuing education.
- 6) Implement a regional marketing plan to recruit qualified providers, conduct contractor QA, review contractor billing and recommend reallocation of funds.

### PHR 11:

- 1) Conduct community assessment and work with community leaders to develop strategic plan for action; compare contractors' services with county needs; determine gaps/duplications in services.
- 2) Facilitate coalition-building activities.
- 3) Ensure Coastal Bend child fatality review team networks with existing Harlingen team.
- 4) Develop and monitor perinatal care system by tracking managed care services in rural counties to determine if gaps in service exist for pregnant women.
- 5) Attend monthly regional perinatal meetings and plan, hold and evaluate annual workshop.

### Administrative Activities

N/A

### Program Evaluation

#### Performance Measures

Performance  
Measures:  
State

N/A

Performance  
Measures:  
Federal

N/A

## **Public Health Regional Offices MCH Services – Title V**

<b>Mandate/authority</b>	<u>State:</u> Chapter 32, Health & Safety Code, Maternal and Infant Health Improvement <u>Federal:</u> Title V, Social Security Act [42 USC 701 <u>et seq.</u> ]; 42 CFR Part 51a, Project Grants for Maternal and Child Health
<b>Origins of program (if no mandate)</b>	N/A
<b>Program Rules</b>	N/A
<b>Advisory Committee or Regulatory Board</b>	N/A